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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/394,526 07/10/2002 *SL YES*
 and claims benefit of 60/394,527 07/10/2002

** FOREIGN APPLICATIONS ***** *SL NO*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY VA	SHEETS DRAWING 8	TOTAL CLAIMS 9	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>SL</i>	EXAMINER'S SIGNATURE Initials			

Verified and
Acknowledged

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TITLE
 Knowledge inferencing and data visualization method and system

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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